Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803

Fax Number : (855)330-1010

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<u>E</u> mail	Address:			

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STUNNA ENTERPRISE LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$25.00

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Stunna Enterprise LLC			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it aow appears on our records.) Jability Company)		
The Articles of Organization for this Limited Liability Company	were filed on 07/19/21	and a	issigned
Florida document number <u>L21000327159</u>		managa 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	G
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	lity company here:		
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	abbreviation	L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	4		
(Mailing address MAY BE A POST OFFICE BOX)			
	711111	····	
B. If amending the registered agent and/or registered office a	ddress on our records, enter the ne	ime af the n	ow ronistored
agent and/or the new registered office address here:	durens on our records; enter the ha	ine or the n	en registeren
			<u>3</u>
Name of New Registered Agent:		2023 []AK	ა •
		A	5
New Registered Office Address:	Enter Florida street address		

	Florida _	Zip Chil	-
New Registered Agent's Signature, if changing Registered Agent:			
		0	I

I hereby accept the appointment as registered agent and agree to act in this capacity. I jurther agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>MG</u> R	Stunna Enterprise LLC	7722 N Palafox Lot D8	□ Add
		Pensacola, FL 32534	1 ⊗Remove
			□Change
<u>MG</u> R	Rebekah Morris	7722 N Palafox st	□Add
		Pensacola, FL 32514	XRemove
			[]Change
<u>MG</u> R	Darren Lee Sr	7722 N Palafox St, Lot D8	X Add
		Pensacola, FL 32534	□Remove
			DChange
<u>MG</u> R	Darren Lee Jr	7722 N Palafox St, Lot E3	3 ×Add
		Pensacola, FL 32534	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			_ DRemove
			_ 🗆 Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Note:	ive date, if other than the date of filing:
ecord is fi	
Dated	March 1 2023
	March 1 2023 Ruhi June of a momber or authorized representative of a member
	Robin Jones Typed or printed name of signee

Filing Fee: \$25.00